

INFOBulletin

Keeping health care providers informed of payment, policy or program changes

To: Physicians, Nurse Practitioners, Hospitals and Clinics

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Re: Insured Sex Reassignment Surgery (SRS)

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This INFOBulletin is to replace an earlier version, INFOBulletin 4666 – Insured Sex Reassignment Surgery, because the program, ministry and division name, as well as the address have changed. The content regarding SRS eligibility criteria and the approval process remains the same as that originally published in March 2016.

Background

This bulletin describes changes to the Schedule of Benefits for Physician Services (Schedule) and Regulation 552 of the Health Insurance Act (HIA) to amend the prior approval criteria for SRS under the Ontario Health Insurance Plan (OHIP), effective March 1, 2016.

The changes will improve access to SRS by allowing qualified providers throughout the province to assess patients for surgery.

The Ministry of Health (Ministry) has developed a website dedicated to providing health care professionals information on [Sex Reassignment Surgery and OHIP](#).

Revised Schedule Criteria for SRS

The revised portion of the Schedule is found in section 17 of Appendix D, SRS. The Schedule can be accessed [here](#).

Submission of a Prior Approval Application

In order to have SRS funded under OHIP, a request for prior approval must be completed by a physician or nurse practitioner and submitted to the Ministry on behalf of the patient. The

[“Request for Prior Approval for Funding of Sex Reassignment Surgery”](#) form is available in the Ontario Central Forms Repository.

The prior approval form must indicate details regarding the proposed location of the requested surgical services. For requested services within Ontario or Out-of-Province (OOP), this form may be completed by the attending Ontario physician or nurse practitioner. In accordance with Regulation 552, Section 28.4(7), of the HIA, when the requested services will be received for Out-of-Country (OOC), Section 6 of this form must be completed by an Ontario physician.

Depending on the type of surgery sought, the prior authorization request must include either one or two supporting assessment(s) from appropriately trained providers confirming that the OHIP funding criteria are met. (See section entitled “Supporting Assessments for Surgery”).

Written confirmation of funding approval must be given by the Ministry before any services are rendered. Services received without approval from the Ministry are not insured and will not be reimbursed.

Individuals will be notified regarding the outcome of the prior approval application through their referring provider.

Supporting Assessments for Surgery

Supporting assessments recommending surgery must come from a physician or nurse practitioner. Where a second recommendation is required, the second recommendation may come from a different physician or nurse practitioner, nurse, registered psychologist, or registered social worker. Any provider assessing a patient and making recommendation for surgery must be trained in the assessment, diagnosis, and treatment of gender dysphoria. Providers completing supporting assessments for surgery must be able to provide documentation of their specialized training upon request of the Ministry.

Note: “Registered social worker” refers to a social worker who has a master’s degree in social work and who holds a current certificate of registration from the Ontario College of Social Workers and Social Service Workers.

For details regarding specific criteria please refer to Section 17 of Appendix D of the [Schedule](#), SRS.

Completed Request for Prior Approval for Funding of SRS forms should be sent to:

Health Services Branch

SRS Program

Ontario Health Insurance Plan Division

Ministry of Health

49 Place d’Armes, 2nd Floor

Kingston ON K7L 5J3

Applications may also be faxed to:

Health Services Branch, SRS Program at (1) 613 536-3188.

Links to Additional Information

The new version of the Schedule is available [here](#).

Hard copies of the Schedule will not be distributed. If you would like to order a paper copy or compact disc (CD) of the Schedule for a fee, please [use this link](#).

This Bulletin is a general summary provided for information purposes only. Physicians, hospitals, and other health care providers are directed to review the HIA, Regulation 552, and the Schedules under that regulation, for the complete text of the provisions. You can access this information at [e-laws](#). In the event of a conflict or inconsistency between this bulletin and the applicable legislation and/or regulations, the legislation and/or regulations prevails.